

VOUCHER NO. 7-12		REQUEST FOR PAYMENT AND POSTING VOUCHER				VOUCHER NO. 7-12					
TO : Finance Division, Accounts Branch		DIVISION VOUCHER NO. 16 April '62 3213									
THROUGH: Monetary Branch											
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.											
SUBJECT		INVOICE NO(S). 6400-23 + 24, 6688-4									
PAYMENT TO Agird-Atomic, Inc.		CONTRACT NO. HF-CT-691									
AMOUNT 3793.32		CHECK TO BE DATED									
CASH PAYMENT <input checked="" type="checkbox"/>		U.S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK					
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.											
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$				OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.							
DATE	SIGNATURE OF PAYEE	DATE	SIGNATURE OF AGENT		DATE	SIGNATURE OF RECIPIENT					
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE	40-42 EXPEND CODE	43 F U N D S	44-46 PAY PER. LIQ. CODE	47-52 OBLIG. REF. NO. ADVANCE ACCT. NO. EMP. NO.	53 CA YR	54-57 GENERAL LEDGER ACCT. NO.	58-67 ALLOT. OR COST ACCT. NO.	68-70 DUE DATE	71-80 AMOUNT
DESCRIPTION-ADVANCE ACCOUNTS 13-27		P.O. NO.	PROJ. NO.							DEBIT	CREDIT
Agird-Atomic						691		601.0	28-1057-0175	740	842.49
"						691		601.0	28-1017-0176	740	2670.00
"						691		176.9	89-0280-0000	830	280.83
"								176.9			280.83
"						691		602.2	28-2004-5230	830	280.83
"											3793.32
DATE 16 April 62		AUTHORIZED CERTIFYING OFFICER SIGNATURE				DATE		TOTALS 4074.15		25X1-4074.15	

**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

O. VOU. NO. _____

Use continuation sheet(s) if necessary

BU. VOU. NO. _____

Page 1 of 1

U. S. _____
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

Payee's Account No. _____ Discount Terms _____

TO Baird-Atomic, Inc.
(Payee)

Cambridge 38, Massachusetts
(Address)

PAID BY

Contract No. HF-CT-691 Date _____ Req. No. _____ Date _____ Invoice Rec'd. _____
Shipped from _____ to _____ Weight _____ Govt. B/L No. _____

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
		<u>Inv. Nos.</u> 6400-23 6400-24 6688-4				\$ 885.62 237.70 2,670.00
TOTAL						\$3,793.32

PAYMENT:

COMPLETE ☐
PARTIAL ☐
FINAL ☐
PROGRESS ☐
ADVANCE ☐

(PAYEE MUST NOT USE THIS SPACE)

DIFFERENCES _____

Amount verified; correct for _____
(Signature or initials)

6793.32

STAT

† Approved for _____ = \$ _____

By _____

Title _____

Exchange rate _____ = \$1.00

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

hot
ht.

16 APR
1962

(Date)

ating Officer)

STAT

Paid by { Check No. _____ on Treasurer of the United States
Check No. _____ on _____ (Name of Bank)
Cash, \$ _____, on _____, 19 _____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per _____
Title _____

ANALYTICAL & CONTROL
INSTRUMENTS

33 University Road, Cambridge 38, Mass. Usetts

TELEPHONE: UNIVERSITY 4-7420 - CABLE: BAIRDCO Cambridge, Massachusetts, U.S.A.

TERMS: NET 30 DAYS

YOUR ORDER

YOUR ORDER

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WASHINGTON, D. C.

 DPD 2512-62
COPY OF

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DATE ORDER RECEIVED		CUSTOMER'S PURCHASE ORDER NO.		SCHEDULED SHIPPING DATE		SALESMAN		INVOICE NUMBER	
		COMMON CUSTOMER				80		92-6503/6400-23	
SHIP VIA		HF-CT-691		F.O.B. POINT		DATE SHIPPED/INVOICE DATE		CARRIER'S RECEIPT NUMBER	
EMERY AIR FREIGHT				DEST.		3/9/62 4/10/62		BOS 57574	
QUANTITY DUE	SHIPPED TODAY	MODEL/PART NUMBER	DESCRIPTION					UNIT PRICE	TOTAL
			PRICED EXHIBIT NO. 9 -- PARTIAL BILLING AGAINST PACKING LIST #402:						
15	15		ITEM #1, AR44-11					35.30	529.50
6	6		ITEM #5, AR44-22					52.78	316.68
4	4		ITEM #11, AR44-396					9.86	39.44
			AMOUNT SUBMITTED FOR REIMBURSEMENT						885.62
<p>We certify that the above bill is correct and just; that payment therefor has not been received.</p> <p>BAIRD-ATOMIC, INC.</p> <p>By <div></div></p>									

STAT

SELLER REPRESENTS THAT WITH RESPECT TO THE PRODUCTION OF THE ARTICLES AND/OR THE PERFORMANCE OF THE SERVICES COVERED BY THIS INVOICE, IT HAS FULLY COMPLIED WITH SECTION 12 (A) OF THE FAIR LABOR STANDARDS ACT OF 1938, AS AMENDED.